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PA 1 6 2006	U.S.	PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031 Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Ilection of information unless it displays a valid OMB control number.						
TRADEMINT TO A N.S. MITTAI	Application Number	10/806,715						
TRANSMITTAL	Filing Date	March 23, 2004						
FORM	First Named Inventor	Bahram Nikpour						
7 0	Art Unit	3745						
(to be used for all correspondence after initial filing)	Examiner Name	Dwayne J. White						
	Attorney Docket Number	HOET-21						
Total Number of Pages in This Submission								
ENCLOSURES (Check all that apply)								
Fee Transmittal Form	Drawing(s)	After Allowance Communication to TC						
Fee Attached	Licensing-related Papers Appeal Communication to Bo of Appeals and Interferences							
Amendment/Reply	Amondmont/Books Petition							
	Petition to Convert to a	(Appeal Notice, Brief, Reply Brief) Proprietary Information						
After Final	Provisional Application Power of Attorney, Revocation	on David State						
Affidavits/declaration(s)	Change of Correspondence	Address Other Enclosure(s) (please Identify						
Extension of Time Request	Terminal Disclaimer	below): PTO 1449						
Express Abandonment Request	Request for Refund	Copy of 1 cited reference						
Information Disclosure Statement	CD, Number of CD(s) PTO 2038 Return Postcard							
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Certified Copy of Priority Document(s)	arks							
Reply to Missing Parts/								
Incomplete Application Reply to Missing Parts								
under 37 CFR 1.52 or 1.53								
	OF APPLICANT, ATTO	RNEY, OR AGENT						
Firm Name Krieg DeVault LLP								
Signature	1/2	•						
Printed name								
John H. Allie		Dog No.						
Date February 14,	2006	Reg. No. 39,088						
CERTIFI	CATE OF TRANSMISS	SION/MAILING						
I hereby certify that this correspondence is being fac-	simile transmitted to the USP1	O or deposited with the United States Postal Service with						
sufficient postage as first class mail in an envelope a	ddressed to: Commissioner fo	or Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on						
the date shown below: Signature	111/1							
The state of the s	wo							
Typed or printed name John/H. Allie		Date Feb 14, 2006						

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Complete if Known Effective on 12/08/2004. ant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** TRANSMITTAI Filing Date

10/806,715 March 23, 2004 For FY 2005 First Named Inventor Bahram Nikpour **Examiner Name** Dwayne J. White Applicant claims small entity status. See 37 CFR 1.27 **Art Unit** 3745 TOTAL AMOUNT OF PAYMENT (%)

TOTAL AMOUNT OF TA	11112141 (4	/ 1200.0	<u> </u>	Attorney Docke	K NO. THUE	<u> </u>	
METHOD OF PAYMEN	IT (check a	I that apply)					
Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 12-2424 Deposit Account Name: Krieg DeVault Lundy For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION							
1. BASIC FILING, SEA	FILING	FEES Small Entity	SEARC	H FEES Small Entity	<u> </u>	TION FEES	Fees Paid (\$)
<u>Application Type</u> Utility	Fee (\$) 300	<u>Fee (\$)</u> 150	<u>Fee (\$)</u> 500	<u>Fee (\$)</u> 250	<u>Fee (\$)</u> 200	Fee (\$) 100	1 000 1 010 (4)
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	000	0	
2. EXCESS CLAIM FE Fee Description Each claim over 20 Each independent cl Multiple dependent Total Claims - 20 or HP = HP = highest number of ind. APPLICATION SIZE	(including Flaim over 3 claims Extra Claims al claims paid f Extra Claims ependent claims	Reissues) (including Reissues) ms Fee (\$) ror, if greater than 20 ms Fee (\$) x s paid for, if greater	sues) = Fee P than 3.	Paid (\$)		Fee (\$) 50 200 360 Multiple C Fee (\$)	Small Entity Fee (\$) 25 100 180 Dependent Claims Fee Paid (\$)
If the specification an listings under 37 C sheets or fraction to Total Sheets - 100 =	CFR 1.52(e) thereof. See Extra She), the application 35 U.S.C. 41(a	on size fee on a)(1)(G) an one of each	due is \$250 (\$	\$125 for sma 16(s). or fraction th	all entity) for ereof <u>Fe</u> e	r each additional 50 Fee Paid (\$) = = = = = = = = = = = = = = = = = = =
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)						Fees Paid (\$)	
Other (e.g., late filing surcharge): Three Month Extension of Time Fee: IDS Fee					1200.00		

SUBMITTED BY		
Signature	Registration No. (Attorney/Agent) 39,088	Telephone (317) 636-4341
Name (Print/Type) John H. Alle		Date Fcb 14, 2006

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